

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756804

**Entity Name:** GARDENS CONDOMINIUM WAREHOUSE ASSOCIATION, INC.

**FILED**  
**Jan 13, 2021**  
**Secretary of State**  
**6445931095CC**

**Current Principal Place of Business:**

10258 RIVERSIDE DRIVE  
STE. 4  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

10258 RIVERSIDE DRIVE  
STE. 4  
PALM BEACH GARDENS, FL 33410 US

**FEI Number: 59-2247883**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MOORE, TIMOTHY J  
10258 RIVERSIDE DRIVE  
SUITE #1  
PALM BEACH GARDENS, FL 33410 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name MOORE, TIMOTHY J  
Address 10258 RIVERSIDE DR. SUITE 2  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title T  
Name SCIALLA, ROBERT JJR.  
Address 10258 RIVERSIDE DR.  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TD  
Name KEATING, MARY J  
Address 10258 RIVERSIDE DR SUITE 2  
City-State-Zip: PALM BEACH GARDENS FL 33410

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: TIMOTHY J. MOORE**

**PD**

**01/13/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date